

# 2016 Annual PFAC Report: Marlborough Hospital

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="William Fischer"/>
Email:	<input type="text" value="billandsuefischer@v"/>
Phone:	<input type="text" value="(508) 485-3605"/>

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="Irene Hadley, Direct"/>
Email:	<input type="text" value="irene.hadley@umass"/>
Phone:	<input type="text" value="508-486-5620"/>

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

Name and Title:	Ellen Carlucci, Vice
Email:	ellen.carlucci@uma
Phone:	508-486-5807

Q23.

**Section 1: PFAC Organization**

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

- |  |  |
|--|--|
| <input checked="" 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 checked="" type="checkbox"/> Community-based organizations        |
| <input checked="" 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 checked="" 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:

5

Q8. Total number of patient or family member advisors on the PFAC:

8

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

Marketing, Communications, Development, Volunteer Services and Community Outreach

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

Vice President, Marketing, Communications, Development, Community Outreach and Volunteer Services

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 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 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 checked="" 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"):

Marlborough, Hudson, Northborough, Southborough, Sudbury, Framingham, Berlin, Bolton, Stow, Westborough

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"/>
Asian	<input type="text"/>
Black or African American	<input type="text"/>
Native Hawaiian or other Pacific Islander	<input type="text"/>
White	<input type="text" value="83%"/>
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?

5-7% (includes Portuguese and Brazilian)

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"/>
Asian	<input type="text" value="1"/>
Black or African American	<input type="text"/>
Native Hawaiian or other Pacific Islander	<input type="text"/>
White	<input type="text" value="69"/>
Other	<input type="text" value="12"/>

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?

10 (Brazilian, Portuguese, Latino)

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"/>
Asian	<input type="text" value="1"/>
Black or African American	<input type="text"/>
Native Hawaiian or other Pacific Islander	<input type="text"/>
White	<input type="text" value="10"/>
Other	<input type="text"/>

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?

2

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)?

9

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	<input type="text" value="5"/>
Portuguese	<input type="text" value="4"/>
Chinese	<input type="text"/>
Haitian Creole	<input type="text"/>
Vietnamese	<input type="text"/>
Russian	<input type="text"/>
French	<input type="text"/>
Mon-Khmer/Cambodian	<input type="text"/>
Italian	<input type="text"/>
Arabic	<input type="text"/>
Albanian	<input type="text"/>
Cape Verdean	<input type="text"/>

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

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:

We work with members of our Interpreter Services team to promote that we have a PFAC and are always recruiting members of the diverse community the hospital serves.

**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:

PFAC Staff Co-chair, PFAC Patient and Family Co-chair and Staff Liaison meet to develop the PFAC meeting agenda based upon input from PFAC members, previous meeting minutes, hospital staff and administration

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:

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

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 checked="" 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 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:

Email is the primary manner in which the PFAC communicates within the group. Agendas, meeting minutes, programs (webinars, etc.) are emailed to the PFAC members. Hospital administration regularly emails members with hospital updates, events and programs being offered and other pertinent health care information. PFAC members are encouraged to follow the hospital on Facebook and Twitter and the PFAC has been mentioned in numerous social media posts.

Q109.

#### Section 4: Orientation and Continuing Education

Q21. Number of new PFAC members this year:

4

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 checked="" 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 checked="" 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 checked="" type="checkbox"/> Immediate "assignments" to participate in PFAC work        |
| <input checked="" type="checkbox"/> History of the PFAC                                   | <input checked="" 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):

Concepts of patient- and family-centered care (PFCC)

Health care quality and safety measurement

Patient engagement in research

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)

Types of research conducted in the hospital

Other

Hospital performance information

Health literacy

Not Applicable

Q116. Please describe other topics:

At each meeting we share information about a variety of topics including health care issues locally, statewide and nationally, safety and quality issues, new initiatives, etc. We work to educate one another and invite speakers to attend the meetings to explain and present. The word "train" in this question is stronger than what we do. We make our members "aware."

**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:

Suggested design and layout for the hospital map that is given out at the front desk for patients and visitors.

Q24a1. The idea for Accomplishment 1 came from:

Patient/family advisors of the PFAC

Department, committee, or unit that requested PFAC input

Q24b. Accomplishment 2:

Updated the written directions that are given out to patients and visitors.

Q24bl. The idea for Accomplishment 2 came from:

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

Q24c. Accomplishment 3:

Provided feedback regarding renovations for various areas of the hospital including the lab waiting room, med/surg unit and ICU.

Q24cl. The idea for Accomplishment 3 came from:

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

Q24d. Accomplishment 4:

Four members attended the 2016 PFAC conference and reported back to the entire PFAC what they learned.

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:

Volunteered at and attended numerous hospital sponsored events including Safe Summer Fun Day, community education programs and fund raising events.

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:

Recruiting members that represent the diversity of the population that the hospital serves.

Q25b. Challenge 2:

Q25c. Challenge 3:

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 checked="" type="checkbox"/> Eliminating Preventable Harm                    |
| <input type="checkbox"/> Bereavement   | <input type="checkbox"/> Emergency Department Patient/Family Experience Improvement |
| <input checked="" type="checkbox"/> Care Transitions                                     | <input type="checkbox"/> Ethics   |
| <input type="checkbox"/> Code of Conduct   | <input type="checkbox"/> Institutional Review Board (IRB)                           |
| <input checked="" type="checkbox"/> Community Benefits                                   | <input type="checkbox"/> Patient Care Assessment                                    |
| <input type="checkbox"/> Critical Care   | <input type="checkbox"/> Patient Education  |
| <input type="checkbox"/> Other   | <input checked="" 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 checked="" type="checkbox"/> Board of Directors                                   | <input checked="" type="checkbox"/> Quality and Safety                              |
| <input type="checkbox"/> Discharge Delays  | <input checked="" 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:

*This question was not displayed to the respondent.*

Q27.

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

The PFAC has members who work in areas/departments of the hospital that address the issues checked off above. If there are opportunities during our meeting for us to share information as to what we are doing or how we are performing, the staff members will inform the other members. The information is recorded in the meeting minutes which in turn are submitted to the hospital's Patient Care Assessment Committee (PCAC). PCAC is a subcommittee of the hospital's board of trustees.

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

- |   |   |
|---|---|
| <input checked="" type="checkbox"/> Quality improvement initiatives                 | <input type="checkbox"/> Institutional Review Boards  |
| <input checked="" type="checkbox"/> Patient education on safety and quality matters | <input type="checkbox"/> N/A – the PFAC did not provide advice or recommendations to the hospital on these areas in FY 2016 |
| <input checked="" type="checkbox"/> Patient and provider relationships              |   |

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

- |  |   |
|--|---|
| <input type="checkbox"/> Task forces   | <input type="checkbox"/> N/A – the PFAC members did not participate in any of these activities  |
| <input type="checkbox"/> Award committees  | <input checked="" type="checkbox"/> Co-trainers for clinical and nonclinical staff, in-service programs, and health professional trainees |
| <input checked="" type="checkbox"/> Advisory boards/groups or panels                 | <input checked="" type="checkbox"/> Selection of reward and recognition programs  |
| <input checked="" type="checkbox"/> Search committees and in the hiring of new staff | <input type="checkbox"/> 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

- |   |   |
|---|---|
| <input checked="" type="checkbox"/> Complaints and investigations reported to Department of Public Health (DPH) | <input checked="" type="checkbox"/> Healthcare-Associated Infections (National Healthcare Safety Network) |
| <input checked="" type="checkbox"/> Serious Reportable Events reported to Department of Public Health (DPH)     | <input checked="" type="checkbox"/> Patient complaints to hospital  |

Q30b. Quality of care

- |   |   |
|---|---|
| <input 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 |
|---|--------------------------------|

Q119. 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:

Some of the items are not applicable--high risk surgeries are not performed here, there is not a maternity or pediatric unit. Our PFAC meets 8 to 10 times a year and our agenda is very robust. We have our priorities and want to make sure our members have a "voice" and share their experiences also so we can learn how to improve our patient centered care and our patient experience. Hospital administration is very transparent and the PFAC meets in the hospital's board room which has results posted throughout the room, hospital wide A3s, True North metrics, etc.

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

At each PFAC meeting, the hospital's balanced score card is shared. The score card contains hospital results on health, quality and safety, patient experience and operations, readmission rates, financial results, growth and innovations.

**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 checked="" type="checkbox"/> Identifying patients correctly | <input checked="" type="checkbox"/> Preventing infection             |
| <input checked="" type="checkbox"/> Using medicines safely         | <input checked="" type="checkbox"/> Identifying patient safety risks |
| <input type="checkbox"/> Using alarms safely                       | <input type="checkbox"/> Preventing mistakes in surgery              |

Q33b. Prevention and errors

- |  |  |
|--|--|
| <input checked="" type="checkbox"/> Hand-washing initiatives   | <input checked="" type="checkbox"/> Team training                  |
| <input checked="" type="checkbox"/> Checklists   | <input type="checkbox"/> Electronic Health Records –related errors |
| <input checked="" type="checkbox"/> Fall prevention  | <input checked="" type="checkbox"/> Safety                         |
| <input checked="" type="checkbox"/> Care transitions (e.g., discharge planning, passports, care coordination, and follow up between care settings) | <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, advanced directives) |

Q33d.

Additional quality initiatives

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

Q33e. Other

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

Q120. Please describe other initiatives:

Once again, I want to reiterate that there are members of the PFAC who are hospital employees and work on many of initiatives listed above in a variety of ways. These same members provide insight and information to the PFAC members who are patients or family members.

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):

Bill Fisher and Irene Hadley reviewed prior to submission.

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:

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:  
PFACMarlborough@umassmemorial.org 508-486-5624
- No

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

- Yes, link:
- No, we don't have such a section on our website