

# 2016 Annual PFAC Report: Whittier Rehabilitation Hospital-Bradford

Q129.

**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.

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):

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:

Email:

Phone:

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:

Email:

Phone:

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 checked="" 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 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 type="checkbox"/> Recruitment brochures   | <input 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:

8

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

17

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

Administration

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

Customer Relations Coordinator

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 checked="" 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 type="checkbox"/> Meetings outside 9am-5pm office hours                      |
| <input type="checkbox"/> Stipends   | <input type="checkbox"/> Other  |

Payment for attendance at annual PFAC conference

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"):

Greater Haverhill/Merrimack Valley areas

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="1%"/>
Asian	<input type="text" value="2%"/>
Black or African American	<input type="text" value="4%"/>
Native Hawaiian or other Pacific Islander	<input type="text"/>
White	<input type="text" value="66%"/>
Other	<input type="text" value="27%"/>

Q91.

Don't know racial groups

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

27%

Q92.

Don't know origins

Q13bR. In FY 2016, the hospital provided care to patients from the following racial groups (please provide percentages):

*This question was not displayed to the respondent.*

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?

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

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)?

5%

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="3%"/>
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"/>

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	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%

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:

The hospital distributes PFAC information/brochures to each inpatient during their stay. Clinical staff members will also provide patient and family referrals to the PFAC Coordinator for potential membership opportunities.

**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:

We incorporate topics and issues discussed at meetings into the agenda at the following meeting. In addition, we present reoccurring information at each quarterly 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. Develop a more personalized communication tool between patients and and non-clinical departments to provide the highest quality of service. 2. Implement a Discharge Checklist to assist patients in preparation for their transition, whether it be home or a step-down facility. 3. Involve PFAC members in hospital training and education. 4. Encourage and equip PFAC members to participate in other organizations/groups within the hospital.

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 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 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:

N/A

Q109.

#### Section 4: Orientation and Continuing Education

Q21. Number of new PFAC members this year:

3

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

- |   |  |
|---|--|
| <input checked="" type="checkbox"/> Meeting with hospital staff                           | <input type="checkbox"/> Other   |
| <input 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 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 type="checkbox"/> Hospital performance information                     | <input type="checkbox"/> Health literacy  |
| <input checked="" 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:

We established a personalized communication tool between patients and Environmental Services Staff to ensure high quality service. Each patient receives a tent card in their room which describes explains areas that will be attended to during their stay. A direct phone extension for the Department Director is listed for special needs and/or requests.

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:

A discharge checklist was developed and will be added into the Patient Education folders, which are distributed to all patients during their stay. It is designed to assist patients prepare to transition from the facility to their next stop. Patients felt it would: - Relieve some of the anxieties of moving on to a different facility or level of care - Define how and when they will be receiving discharge related information - Assist families in knowing which questions to ask before leaving the facility

Q24b1. The idea for Accomplishment 2 came from:

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

Q24c. Accomplishment 3:

Included PFAC members in hospital trainings. Several patient PFAC members were able to participate in the hospital's Active Shooter Training Drills held onsite, along side of the local police department. With an increasing number of mass shootings occurring all over the world today, it's important to be equipped with hands on training and information to keep yourself safe, while potentially saving the lives of those around you.

Q24c1. The idea for Accomplishment 3 came from:

- Patient/family advisors of the PFAC

- Department, committee, or unit that requested PFAC input

Q24d. Accomplishment 4:

For PFAC members to participate in other program areas within the hospital. Several members trained to become part of our Peer Visitor program.

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:

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:

Diversifying PFAC membership to include ethnic groups and cultures that represent our local catchment area.

Q25b. Challenge 2:

Due to PFAC meetings being held on a quarterly weekday, it can be difficult Patient/Family members to attend.

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 type="checkbox"/> Eliminating Preventable Harm                               |
| <input type="checkbox"/> Bereavement   | <input type="checkbox"/> Emergency Department Patient/Family Experience Improvement |
| <input type="checkbox"/> Care Transitions  | <input 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 type="checkbox"/> Other   | <input type="checkbox"/> Patient and Family Experience Improvement                  |
| <input checked="" 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:

*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?

*This question was not displayed to the respondent*

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

- |  |  |
|--|--|
| <input type="checkbox"/> Quality improvement initiatives | <input type="checkbox"/> Institutional Review Boards |
|--|--|

- Patient education on safety and quality matters
  - Patient and provider relationships
- N/A – the PFAC did not provide advice or recommendations to the hospital on these areas in FY 2016

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

- Task forces
- Award committees
- Advisory boards/groups or panels
- Search committees and in the hiring of new staff
- N/A – the PFAC members did not participate in any of these activities
- Co-trainers for clinical and nonclinical staff, in-service programs, and health professional trainees
- Selection of reward and recognition programs
- 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)
- Serious Reportable Events reported to Department of Public Health (DPH)
- Healthcare-Associated Infections (National Healthcare Safety Network)
- Patient complaints to hospital

Q30b. Quality of care

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

Q30c. Resource use and patient satisfaction

- Patient experience/satisfaction scores (eg. HCAHPS - Hospital Consumer Assessment of Healthcare Providers and Systems)
- Resource use (such as length of stay, readmissions)
- Inpatient care management (such as electronically ordering medicine, specially trained doctors for ICU patients)

Q30d. Other

- N/A – the hospital did not share performance information with the PFAC  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:

This PFAC committee meets on a quarterly basis. In the interest of time, we focus our meeting agendas on the areas we feel our patient/family members would best utilized as resources. However, each meeting ends with an open discussion in which members are welcome to present questions or issues on any area that affects the hospital.

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

Our committee openly shares his/her experiences both inside and outside of our facility in the related area. This will in turn prompt further discussion regarding quality improvement if applicable.

**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 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 type="checkbox"/> Fall prevention  | <input type="checkbox"/> Safety                                    |
| <input 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 |
|--|--|

Improving information for patients and families

End of life planning (e.g., hospice, palliative, advanced directives)

Q33d.

Additional quality initiatives

Rapid response teams

Integration of behavioral health care

Disclosure of harm and apology

Q33e. Other

N/A – the hospital did not share performance information with the PFAC

Other

Q 120. Please describe other initiatives:

*This question was not displayed to the respondent.*

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.*

Q 121. 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):

Robert Iannaco, Hospital Administrator

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:
- 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