

2016 Annual PFAC Report: Winchester 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="Kathy Schuler Vice f"/> |
| Email: | <input type="text" value="kschuler@winhosp.or"/> |
| Phone: | <input type="text" value="781-756-2127"/> |

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="Currently Vacant"/> |
| Email: | <input type="text" value="kschuler@winhosp.or"/> |
| Phone: | <input type="text" value="781-756-2127"/> |

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

This question was not displayed to the respondent

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 type="checkbox"/> Community-based organizations |
| <input type="checkbox"/> Facebook and Twitter | <input type="checkbox"/> Houses of worship |
| <input checked="" type="checkbox"/> Recruitment brochures | <input 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:

9

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

Nursing Administration

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

Vice President Patient Care, CNO

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 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 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"):

Northwest 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="0%"/> |
| Asian | <input type="text" value="9%"/> |
| Black or African American | <input type="text" value="6%"/> |
| Native Hawaiian or other Pacific Islander | <input type="text" value="0%"/> |
| White | <input type="text" value="0%"/> |
| Other | <input type="text" value="4%"/> |

Q91.

Don't know racial groups

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

5%

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="2.73%"/> |
| Black or African American | <input type="text" value="2.48%"/> |
| Native Hawaiian or other Pacific Islander | <input type="text" value="0.002%"/> |
| White | <input type="text" value="90.71%"/> |
| Other | <input type="text" value="3.99%"/> |

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?

This question was not displayed to the respondent.

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="0.066%"/> |
| 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="99.4%"/> |
| 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)?

4.2%

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 | 0.67% |
| Portuguese | 0.55% |
| Chinese | 0.36% |
| Haitian Creole | 0.22% |
| Vietnamese | 0.12% |
| Russian | 0.15% |
| French | 0.03% |
| Mon-Khmer/Cambodian | 0% |
| Italian | 0.42% |
| Arabic | 0.14% |
| Albanian | 0.02% |
| Cape Verdean | 0% |

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:

When we are recruiting members we would preferentially select an appropriate advisor on the council that would add cultural diversity to the group. In addition, hospital leaders have been asked to recommend joining the PFAC to patients they may interact with who would represent cultural diversity.

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:

At each meeting the PFAC is polled for agenda items. In addition, staff suggest possible agenda items to assess interest.

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:

This question was not displayed to the respondent.

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 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:

We use email to notify PFAC members of meetings and agendas.

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 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 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):

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:

general hospital orientation topics such as emergency codes, hospital mission/vision as well as the PFAC by-laws, history, goals.

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:

Providing feedback to LHS senior leadership on the development of a Lahey Health System mission and vision statement. Although each organization within Lahey Health System has a mission and vision statement, the Lahey Health System does not. The Vice President for Strategic Planning for the Lahey Health System met with the combined PFACs for all organizations in the system and engaged in discussion on the mission and vision statement for the system.

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:

Providing feedback to a consultant hire by Lahey Health System on the LHS Community Needs Assessment. The results of the Lahey Health System Community Needs Assessment were reviewed with the PFAC. The PFAC added validity to the findings in the Winchester Hospital primary service area. Specifically the PFAC recommended a focus on the current opioid crisis and the needs of the elderly.

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:

Helped to create an updated version of the Winchester Hospital Guide to Guest Services. Winchester Hospital has a Guide to Guest Services at every bedside. The current version was several years old and needed to be updated. The PFAC reviewed the draft revisions and offered several suggestions such as including a map of the hospital that was very valuable to the team involved in the revisions.

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:

The Breast Care Center is introducing a new risk assessment tool (Hughes Risk Assessment). Once implemented, women at the Breast Care Center will complete a questionnaire and will consent and the results will be sent securely to the woman's physicians office. The physician will see the projected five-year and lifetime risk for breast and ovarian cancer using risk models. The model, process and brochure were reviewed and discussed with the PFAC. The PFAC offered multiple suggestions which were brought back to the team developing the process.

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:

In addition to the general Winchester Hospital PFAC our Maternal Child Health division has a specialty area PFAC focused on the special care nursery. This year's accomplishment was addressing the issue of family being able to stay overnight Background: parents have always wished for a parent sleep space. Historically, Mother Baby Unit allows one night if space available . This does not help readmits or those that cannot be accommodated by Mother Baby Unit. In addition, the stance of Special Care Nursery has historically been, if we cannot let everyone stay - we let no one stay Assessment. Strong parental voice to explore all opportunities. Recommended re-explore SCN family rooms Plan: issue was re explored with nursing and Neonatology. All agreed to allow parents to stay . Hospital policy was changed to align with PFAC recommendation.

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:

Recruitment of new PFAC members. This year we experienced turn over of several PFAC members who had served on the council since 2010. Recruiting new members is challenging.

Q25b. Challenge 2:

Consistent with the hospital policy, flu vaccinations were mandatory for all PFAC members (required for all hospital employees and volunteers) two PFAC members elected not to be vaccinated and so they were unable to participate in meetings during flu season. An offer was made and declined to participate by way of conference call.

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 checked="" type="checkbox"/> Ethics |
| <input type="checkbox"/> Code of Conduct | <input checked="" 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 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 checked="" 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?

Safety Committee representative reports back to PFAC.

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 type="checkbox"/> Co-trainers for clinical and nonclinical staff, in-service programs, and health professional trainees |
| <input type="checkbox"/> Advisory boards/groups or panels | <input type="checkbox"/> Selection of reward and recognition programs |
| <input type="checkbox"/> Search committees and in the hiring of new staff | <input checked="" 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 type="checkbox"/> Complaints and investigations reported to Department of Public Health (DPH) | <input type="checkbox"/> Healthcare-Associated Infections (National Healthcare Safety Network) |
| <input type="checkbox"/> Serious Reportable Events reported to Department of Public Health (DPH) | <input 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

- 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:

CHART II initiatives and metrics were shared and discussed.

Q31. Please explain why the hospital shared only the data you checked in the previous questions:

The PFAC meets every other month for two hours so how much material we can cover is limited.

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

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 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 type="checkbox"/> Hand-washing initiatives | <input type="checkbox"/> Team training |
| <input type="checkbox"/> Checklists | <input checked="" type="checkbox"/> Electronic Health Records –related errors |
| <input 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 type="checkbox"/> Improving information for patients and families | <input checked="" 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 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 type="checkbox"/> 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.

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):

Kathy Schuler - staff

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:

781-756-2216

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