

2017 Patient and Family Advisory Council Annual Report Form

The survey questions concern PFAC activities in fiscal year 2017 only: (July 1, 2016 – June 30, 2017).

Section 1: General Information

1. Hospital Name: Spaulding Rehabilitation Hospital Cape Cod

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.

2a. Which best describes your PFAC?

We are the only PFAC at a single hospital – **skip to #3 below**

We are a PFAC for a system with several hospitals – **skip to #2C below**

We are one of multiple PFACs at a single hospital

We are one of several PFACs for a system with several hospitals – **skip to #2C below**

Other (Please describe: _____)

2b. Will another PFAC at your hospital also submit a report?

Yes

No

Don't know

2c. Will another hospital within your system also submit a report?

Yes

No

Don't know

3. Staff PFAC Co-Chair Contact:

2a. Name and Title: Colleen McCauley PT, DPT, CBIS, NCS, Inpatient Physical Therapy
Clinical Specialist

2b. Email: cmccauley1@partners.org

2c. Phone: 508-833-4252

Not applicable

4. Patient/Family PFAC Co-Chair Contact:

3a. Name and Title: _____

3b. Email: _____

3c. Phone: _____

Not applicable

5. Is the Staff PFAC Co-Chair also the Staff PFAC Liaison/Coordinator?

- Yes – skip to #7 (Section 1) below
 No – describe below in #6

6. Staff PFAC Liaison/Coordinator Contact:

6a. Name and Title: _____

6b. Email: _____

6c. Phone: _____

- Not applicable

Section 2: PFAC Organization

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

- Case managers/care coordinators
 Community based organizations
 Community events
 Facebook, Twitter, and other social media
 Hospital banners and posters
 Hospital publications
 Houses of worship/religious organizations
 Patient satisfaction surveys
 Promotional efforts within institution to patients or families
 Promotional efforts within institution to providers or staff
 Recruitment brochures
 Word of mouth/through existing members
 Other (Please describe: our Volunteer Coordinator)
 N/A – we did not recruit new members in FY 2017

8. Total number of staff members on the PFAC: 6.

9. Total number of patient or family member advisors on the PFAC: 8.

10. The name of the hospital department supporting the PFAC is: Quality and Compliance

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

12. The hospital provides the following for PFAC members to encourage their participation in meetings (check all that apply):

- Annual gifts of appreciation
 Assistive services for those with disabilities

- Conference call phone numbers or “virtual meeting” options
- Meetings outside 9am-5pm office hours
- Parking, mileage, or meals
- Payment for attendance at annual PFAC conference
- Payment for attendance at other conferences or trainings
- Provision/reimbursement for child care or elder care
- Stipends
- Translator or interpreter services
- Other (Please describe: _____)
- N/A

Section 3: Community Representation

The PFAC regulations require that patient and family members in your PFAC be “representative of the community served by the hospital.” If you are not sure how to answer the following questions, contact your community relations office or check “don’t know.”

13. Our hospital’s catchment area is geographically defined as: Barnstable County, Plymouth County, Dukes County

Don’t know

14. Tell us about racial and ethnic groups in these areas (please provide percentages; if you are unsure of the percentages check “don’t know”):

	RACE						ETHNICITY		
	%	%	%	%	%	%	%		
	American Indian or Alaska Native	Asian	Black or African American	Native Hawaiian or other Pacific Islander	White	Other	Hispanic, Latino, or Spanish origin		
14a. Our defined catchment area								<input checked="" type="checkbox"/> Don’t know	
14b. Patients the hospital provided care to in FY 2017	0.2%	0.2%	1.5%	0.1%	96.6%			<input type="checkbox"/> Don’t know	

14c. The PFAC patient and family advisors in FY 2017								<input type="checkbox"/> Don't know
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15. Tell us about languages spoken in these areas (please provide percentages; if you are unsure of the percentages select "don't know"):

	Limited English Proficiency (LEP)	
	%	
15a. Patients the hospital provided care to in FY 2017	<0/1%	<input type="checkbox"/> Don't know
15b. PFAC patient and family advisors in FY2017		<input type="checkbox"/> Don't know

15c. What percentage of patients that the hospital provided care to in FY 2017 spoke the following as their primary language?

	%
Spanish	
Portuguese	
Chinese	
Haitian Creole	
Vietnamese	
Russian	
French	
Mon-Khmer/Cambodian	
Italian	
Arabic	

Albanian	
Cape Verdean	

Don't know

15d. In FY 2017, what percentage of PFAC patient and family advisors spoke the following as their primary language?

	%
Spanish	
Portuguese	
Chinese	
Haitian Creole	
Vietnamese	
Russian	
French	
Mon-Khmer/Cambodian	
Italian	
Arabic	
Albanian	
Cape Verdean	

Don't know

Continued...

Section 4: PFAC Operations

17. Our process for developing and distributing agendas for the PFAC meetings (choose):

- 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.
(Please describe below in #17a)
- PFAC members and staff develop agenda together and distribute it at the meeting. (Please describe below in #17a)
- Other process (Please describe below in #17b)
- N/A – the PFAC does not use agendas

17a. If staff and PFAC members develop the agenda together, please describe the process:

All members are able to recommend a topic to be discussed at the following meeting, or they can email the PFAC chair and have an item added to the agenda for the upcoming meeting if time allows

17b. If other process, please describe:

Other hospital departments may request that a relevant item be added to the agenda for discussion and specific input from PFAC members.

18. The PFAC goals and objectives for 2017 were: (check the best choice):

- Developed by staff alone
- Developed by staff and reviewed by PFAC members
- Developed by PFAC members and staff
- N/A – we did not have goals for FY 2017 – **Skip to #20**

19. The PFAC had the following goals and objectives for 2017:

- Completion of Disability Etiquette Brochure to be distributed at Spaulding Cape Cod
- Completion of Annual PFAC-sponsored presentation with focus on the patient and family experience during the rehabilitation process
- Participate in the Health Care for All annual conference (if applicable)

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

N/A

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

- PFAC submits annual report to Board
- PFAC submits meeting minutes to Board
- Action items or concerns are part of an ongoing “Feedback Loop” to the Board
 - PFAC member(s) attend(s) Board meetings
 - Board member(s) attend(s) PFAC meetings
 - PFAC member(s) are on board-level committee(s)
 - Other (Please describe: _____)
- N/A – the PFAC does not interact with the Hospital Board of Directors

22. Describe the PFAC’s use of email, listservs, or social media for communication:

We utilize email regarding distribution of agendas, minutes and communication in between meetings

- N/A – We don’t communicate through these approaches

Section 5: Orientation and Continuing Education

23. Number of new PFAC members this year: 3

24. Orientation content included (check all that apply):

- “Buddy program” with experienced members
- Check-in or follow-up after the orientation
- Concepts of patient- and family-centered care (PFCC)
- General hospital orientation
- Health care quality and safety
- History of the PFAC
- Hospital performance information
- Immediate “assignments” to participate in PFAC work
- Information on how PFAC fits within the organization’s structure
- In-person training
- Massachusetts law and PFACs
- Meeting with hospital staff
- Patient engagement in research
- PFAC policies, member roles and responsibilities
- Skills training on communication, technology, and meeting preparation
- Other (Please describe below in #24a)

N/A – the PFAC members do not go through a formal orientation process

24a. If other, describe:

25. The PFAC received training on the following topics:

- Concepts of patient- and family-centered care (PFCC)
- Health care quality and safety measurement
- Health literacy
- A high-profile quality issue in the news in relation to the hospital (e.g. simultaneous surgeries, treatment of VIP patients, mental/behavioral health patient discharge, etc.)
- Hospital performance information
- Patient engagement in research
- Types of research conducted in the hospital
- Other (Please describe below in #25a)
- N/A – the PFAC did not receive training

25a. If other, describe:

Continued...

Section 6: FY 2017 PFAC Impact and Accomplishments

The following information only concerns PFAC activities in the fiscal year 2017.

26. The five greatest accomplishments of the PFAC were:

- Continuation of Annual PFAC presentation with focus on concepts related to the patient and family experience, this time representing our pediatric population and their families.
- Creation of Disability Etiquette Brochure, which is currently being reviewed by our marketing department and on the network level
- Consultation regarding the set up of new Patient and Family room on the inpatient unit of the hospital; PFAC provided input on the layout of the space, furniture, and focused use for patients and families.
- Consultation on the inpatient Patient Guide, including documents to be utilized by patient and family during their inpatient hospital stay; PFAC provided input regarding expectations, rehabilitation process, TV guide, and education channel programming.
- Analysis of patient rooms to provide feedback for set up, accessibility, and patient safety to improve the patient experience during hospitalization
- Participation in an information session regarding the Driving Assessment and Rehabilitation Program within Spaulding Cape.
- Patient rounding/quality analysis pilot implemented during E-Care go live was extended and is now regular hospital volunteer activity. E-Care go live period was a transition of the entire hospital and other hospitals within the Spaulding network to a new computerized documentation system impacting all inpatient and outpatient facilities.

Accomplishment	Idea came from (choose one)	PFAC role can be best described as (choose one)
26a. Accomplishment 1:	<input checked="" type="checkbox"/> Patient/family advisors of the PFAC <input type="checkbox"/> Department, committee, or unit that requested PFAC input	<input type="checkbox"/> Being informed about topic <input type="checkbox"/> Providing feedback or perspective <input type="checkbox"/> Discussing and influencing decisions/agenda

		<input checked="" type="checkbox"/> Leading/co leading
26b. Accomplishment 2:	<input checked="" type="checkbox"/> Patient/family advisors of the PFAC <input type="checkbox"/> Department, committee, or unit that requested PFAC input	<input type="checkbox"/> Being informed about topic <input type="checkbox"/> Providing feedback or perspective <input type="checkbox"/> Discussing and influencing decisions/agenda <input checked="" type="checkbox"/> Leading/co leading
26c. Accomplishment 3:	<input type="checkbox"/> Patient/family advisors of the PFAC <input checked="" type="checkbox"/> Department, committee, or unit that requested PFAC input	<input type="checkbox"/> Being informed about topic <input checked="" type="checkbox"/> Providing feedback or perspective <input type="checkbox"/> Discussing and influencing decisions/agenda <input type="checkbox"/> Leading/co leading
26d. Accomplishment 4:	<input type="checkbox"/> Patient/family advisors of the PFAC <input checked="" type="checkbox"/> Department, committee, or unit that requested PFAC input	<input type="checkbox"/> Being informed about topic <input type="checkbox"/> Providing feedback or perspective <input checked="" type="checkbox"/> Discussing and influencing decisions/agenda <input type="checkbox"/> Leading/co leading
26e. Accomplishment 5:	Patient/family advisors of the PFAC X Department, committee, or unit that	<input type="checkbox"/> Being informed about topic X Providing feedback or

	requested PFAC input	<p>perspective</p> <p><input type="checkbox"/> Discussing and influencing decisions/agenda</p> <p><input type="checkbox"/> Leading/co leading</p>
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27. The five greatest challenges the PFAC had in FY 2017:

27a. Challenge 1: Progressing materials through all the departments within the hospital and network

27b. Challenge 2: Addition/recruitment of new members across variable diagnostic groups within the hospital system

27c. Challenge 3:

27d. Challenge 4:

27e. Challenge 5:

N/A – we did not encounter any challenges in FY 2017

We had minimal challenges as a group during the FY 2017, overall our accomplishments have been growing as our group gains momentum.

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28. The PFAC members serve on the following hospital-wide committees, projects, task forces, work groups, or Board committees:

- Behavioral Health/Substance Use
- Bereavement
- Board of Directors
- Care Transitions
- Code of Conduct
- Community Benefits
- Critical Care
- Culturally Competent Care
- Discharge Delays
- Diversity & Inclusion
- Drug Shortage
- Eliminating Preventable Harm
- Emergency Department Patient/Family Experience Improvement
- Ethics
- Institutional Review Board (IRB)
- Lesbian, Gay, Bisexual, and Transgender (LGBT) – Sensitive Care
- Patient Care Assessment
- Patient Education
- Patient and Family Experience Improvement
- Pharmacy Discharge Script Program
- Quality and Safety
- Quality/Performance Improvement
- Surgical Home
- Other (Please describe: _____)

N/A – the PFAC members do not serve on these – **Skip to #30**

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

Staff members who are members of these committees bring information back to PFAC and solicit feedback regarding topics impacting the patient experience in both inpatient and outpatient settings.

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

- Institutional Review Boards
- Patient and provider relationships
- Patient education on safety and quality matters
- Quality improvement initiatives
- N/A – the PFAC did not provide advice or recommendations to the hospital on these areas in FY 2017

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

- Advisory boards/groups or panels
- Award committees
- Co-trainers for clinical and nonclinical staff, in-service programs, and health professional trainees
- Search committees and in the hiring of new staff
- Selection of reward and recognition programs
- Standing hospital committees that address quality
- Task forces
- N/A – the PFAC members did not participate in any of these activities

32. The hospital shared the following public hospital performance information with the PFAC (check all that apply):

32a. Complaints and serious events

- Complaints and investigations reported to Department of Public Health (DPH)
- Healthcare-Associated Infections (National Healthcare Safety Network)
- Patient complaints to hospital
- Serious Reportable Events reported to Department of Public Health (DPH)

32b. Quality of care

- High-risk surgeries (such as aortic valve replacement, pancreatic resection)
- Joint Commission Accreditation Quality Report (such as asthma care, immunization, stroke care)
- Medicare Hospital Compare (such as complications, readmissions, medical imaging)
- Maternity care (such as C-sections, high risk deliveries)

32c. Resource use, patient satisfaction, and other

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

N/A – the hospital did not share performance information with the PFAC – **Skip to #35**

33. Please explain why the hospital shared only the data you checked in Q 32 above:

This was the information that was presented by our Quality and Compliance department, as our Director and Quality and Compliance is an active member of our PFAC.

34. Please describe how the PFAC was engaged in discussions around these data in #32 above and any resulting quality improvement initiatives:

We have been provided with data, no further discussion was completed as of the writing of this document

35. The PFAC participated in activities related to the following state or national quality of care initiatives (check all that apply):

35a. National Patient Safety Hospital Goals

- Identifying patient safety risks
- Identifying patients correctly
- Preventing infection
- Preventing mistakes in surgery
- Using medicines safely
- Using alarms safely

35b. Prevention and errors

- Care transitions (e.g., discharge planning, passports, care coordination, and follow up between care settings)
- Checklists
- Electronic Health Records –related errors
- Hand-washing initiatives
- Human Factors Engineering
- Fall prevention

Team training

Safety

35c. Decision-making and advanced planning

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

Health care proxies

Improving information for patients and families

Informed decision making/informed consent

35d. Other quality initiatives

Disclosure of harm and apology

Integration of behavioral health care

Rapid response teams

Other (Please describe _____)

N/A – the PFAC did not work in quality of care initiatives

36. Were any members of your PFAC engaged in advising on research studies?

Yes

No – Skip to #40 (Section 6)

37. In what ways are members of your PFAC engaged in advising on research studies? Are they:

Educated about the types of research being conducted

Involved in study planning and design

Involved in conducting and implementing studies

Involved in advising on plans to disseminate study findings and to ensure that findings are communicated in understandable, usable ways

Involved in policy decisions about how hospital researchers engage with the PFAC (e.g. they work on a policy that says researchers have to include the PFAC in planning and design for every study)

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

Researchers contact the PFAC

Researchers contact individual members, who report back to the PFAC

Other (Please describe below in #38a)

None of our members are involved in research studies

38a. If other, describe:

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

- 1 or 2
- 3-5
- More than 5
- None of our members are involved in research studies

Section 7: PFAC Annual Report

We **strongly** suggest that all PFAC members approve reports prior to submission.

40. The following individuals approved this report prior to submission (list name and indicate whether staff or patient/family advisor):

- L. Childs - Patient/Family Advisor
- R. Campbell - Staff and Patient/Family Advisor
- L. Brennan - Patient/Family Advisor
- G. Brennan - Patient/Family Advisor
- D. Deay - Patient/Family Advisor
- C. Duprey - Patient/Family Advisor
- A. Duprey - Patient/Family Advisor
- J. Michelove - Patient/Family Advisor
- C. McCauley - Staff

41. Describe the process by which this PFAC report was completed and approved at your institution (choose the best option).

- Collaborative process: staff and PFAC members both wrote and/or edited the report
- Staff wrote report and PFAC members reviewed it
- Staff wrote report
- Other (Please describe: _____)

Massachusetts law requires that each hospital's annual PFAC report be made available to the public upon request. Answer the following questions about the report:

42. We post the report online.

- Yes, link: _____
- No

43. We provide a phone number or e-mail address on our website to use for requesting the report.

- Yes, phone number/e-mail address:
Diane Galazzo
Director of Quality and Compliance, Spaulding Cape Cod

508.833.4003

dgalazzo@partners.org

No

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

There is mention of PFAC and the contact information of Diane Galazzo to contact for further information

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