



**HEALTH CARE FOR ALL**



## **PFAC Annual Report Form**

Health Care For All (HCFA) promotes health justice in Massachusetts by working to reduce disparities and ensure coverage and access for all. HCFA uses direct service, policy development, coalition building, community organizing, public education and outreach to achieve its mission. HCFA's vision is that everyone in Massachusetts has the equitable, affordable, and comprehensive care they need to be healthy.

### **Why complete an annual report for my PFAC?**

Under Massachusetts law, hospital-wide PFACs are required to write annual reports by October 1<sup>st</sup> each year. These reports must be made available to members of the public upon request. As in past years, HCFA is requesting a copy of each report and submitted reports will be posted on HCFA's website, [www.hcfama.org](http://www.hcfama.org). HCFA recommends using this template to assist with information collection, as well as the reporting of key activities and milestones.

### **What will happen with my report and how will HCFA use it?**

We recognize the importance of sharing of information across PFACs. Each year, we

- make individual reports available online
- share the data so that PFACs can learn about what other groups are doing

### **Who can I contact with questions?**

Please contact us at [PFAC@hcfama.org](mailto:PFAC@hcfama.org) or call us at 617-275-2982.

If you wish to use this Word document or any other form, please email it to [PFAC@hcfama.org](mailto:PFAC@hcfama.org).

**Reports should be completed by October 1, 2018.**

## Section 1: General Information

1. Hospital Name: UMass Memorial - Marlborough Hospital

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: Irene Hadley, director of case management

2b. Email: irene.hadley@umassmemorial.org

2c. Phone: 508-486-5620

- Not applicable

4. Patient/Family PFAC Co-Chair Contact:

3a. Name and Title: William Fischer

3b. Email: billandsuefischer@verizon.net

3c. Phone: (508) 485-3605

- 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: Ellen C. Carlucci, vice president

6b. Email: ellen.carlucci@umassmemorial.org

6c. Phone: 50

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):
- N/A – we did not recruit new members in FY 2018

8. Total number of staff members on the PFAC: 14

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

10. The name of the hospital department supporting the PFAC is:  
Marketing/Communications/Community Outreach

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

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: Metrowest-10 communities

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	0	2.0	.6		83.6	5.9	5.3	<input type="checkbox"/> Don’t know
14b. Patients the hospital provided care to in FY 2018								<input type="checkbox"/> Don’t know
14c. The PFAC patient and family advisors in FY 2018					93	7		<input type="checkbox"/> Don’t know

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 2018		<input type="checkbox"/> Don't know
15b. PFAC patient and family advisors in FY 2018		<input type="checkbox"/> Don't know

15c. What percentage of patients that the hospital provided care to in FY 2018 spoke the following as their primary language?

	%
Spanish	4
Portuguese	6
Chinese	
Haitian Creole	
Vietnamese	
Russian	
French	
Mon-Khmer/Cambodian	
Italian	
Arabic	
Albanian	
Cape Verdean	

Don't know

15d. In FY 2018, 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

**16. The PFAC is undertaking the following activities to ensure appropriate representation of our membership in comparison to our patient population or catchment area:**

## 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:

Patient/Family co-chair develops an agenda and meets with staff co-chair and administration liaison to review and discuss. Agenda is then emailed to all PFAC members with the previous month's meeting minutes.

#### 17b. If other process, please describe:

### 18. The PFAC goals and objectives for 2018 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 2018 – Skip to #20

### 19. The PFAC had the following goals and objectives for 2018:

Marlborough Hospital has struggled with patient experience and "likelihood to recommend." Everyone at the hospital--trustees, physicians, nurses, volunteers, caregivers and PFAC members are working diligently and collaboratively to improve the hospital's scores and the reputation of the hospital. The hospital has 17 A3s (using lean management tools) targeted at improving the patient experience. PFAC members have been actively involved in the A3s and the action plans of the A3s are regularly reviewed and shared at the PFAC meetings. The main goal for the Marlborough Hospital PFAC is to be the "voice" of the patient and to share with hospital leadership, advice, recommendations and feedback about what the patient and their families need and want while they are here.

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

**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): co-chair serves as a trustee
- 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:**

Meeting agendas and meeting minutes are sent out to PFAC members via email. Issues discussed at PFAC meetings that require follow-up are emailed to PFAC members. PFAC members receive other communication from the hospital administration, for example, upcoming events, important hospital announcements, safety alerts/concerns, media coverage, etc. Marlborough Hospital has an active social media presence and many PFAC members follow the hospital's posts. The hospital also promotes the PFAC on social media and public website to acknowledge the role the PFAC plays at Marlborough Hospital.

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

## **Section 5: Orientation and Continuing Education**

**23. Number of new PFAC members this year: 2**

**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:**

The Environment of Care Plan was shared with the PFAC by the director of facilities.

**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:**

The process involved in implementing a new electronic medical record at UMass Memorial Health Care. Joint Commission accreditation surveys and the preparation involved. Patient Satisfaction scores and Press Ganey surveys. Caregiver engagement and the correlation between patient experience and caregiver engagement. Idea management and LEAN at UMass Memorial Health Care (A3s, gemba rounds, etc.)

## Section 6: FY 2018 PFAC Impact and Accomplishments

The following information only concerns PFAC activities in the fiscal year 2018.

26. The five greatest accomplishments of the PFAC were:

Accomplishment	Idea came from (choose one)	PFAC role can be best described as (choose one)
<p><b>26a. Accomplishment 1: Involvement in the hospital's initiatives to improve Patient Experience. Members of the PFAC attended the kick-off meeting held by hospital leadership to focus on improving the patient experience. Directors of hospital departments including food services, facilities, housekeeping, nursing, administration as well as trustees have attended and presented at PFAC meetings. PFAC members were involved in patient menu tasting and provided feedback to improve the inpatient menus and the taste and presentation of food served to patients. The director of housekeeping also attended a PFAC meeting to get feedback</b></p>	<p><input checked="" type="checkbox"/> Patient/family advisors of the PFAC</p> <p><input checked="" type="checkbox"/> Department, committee, or unit that requested PFAC input</p>	<p><input checked="" type="checkbox"/> Being informed about topic</p> <p><input checked="" type="checkbox"/> Providing feedback or perspective</p> <p><input type="checkbox"/> Discussing and influencing decisions/agenda</p> <p><input type="checkbox"/> Leading/co leading</p>

<p>on what is a "picture perfect" room at the hospital in terms of cleanliness and neatness.</p>		
<p><b>26b. Accomplishment 2: Provided feedback and recommendations for a renovation project of a family waiting room in the Emergency Department.</b></p>	<p><input checked="" type="checkbox"/> Patient/family advisors of the PFAC  <input checked="" type="checkbox"/> Department, committee, or unit that requested PFAC input</p>	<p><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</p>
<p><b>26c. Accomplishment 3:PFAC involvement in hospital committees. PFAC co-chair attends PCAC monthly meetings. PFAC meeting minutes are submitted to PCAC and reviewed and accepted. PFAC co-chair serves on the board of trustees and regularly attends strategic planning sessions for the hospital as well as UMass Memorial Health Care. The "voice" of the PFAC is highly regarded by the board chair and trustees. PFAC members also share information with other PFACS throughout UMass Memorial Health Care and participate in update conference calls, PFAC newsletters and several social events throughout the year.</b></p>	<p><input checked="" type="checkbox"/> Patient/family advisors of the PFAC  <input checked="" type="checkbox"/> Department, committee, or unit that requested PFAC input</p>	<p><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</p>
<p><b>26d. Accomplishment 4: PFAC members share their health care experiences at meetings and this information is served with hospital leadership for follow-up and recommendations for improvements in patient and family members' experience while at the hospital.</b></p>	<p><input checked="" type="checkbox"/> Patient/family advisors of the PFAC  <input type="checkbox"/> Department, committee, or unit that requested PFAC input</p>	<p><input checked="" type="checkbox"/> Being informed about topic  <input checked="" type="checkbox"/> Providing feedback or perspective  <input checked="" type="checkbox"/> Discussing and influencing decisions/agenda  <input checked="" type="checkbox"/> Leading/co leading</p>

**26e. Accomplishment 5: PFAC members provided recommendations for art selection to be used in the main corridors in the hospital as part of a renovation project.**

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

Being informed about topic  
 Providing feedback or perspective  
 Discussing and influencing decisions/agenda  
 Leading/co leading

**27. The five greatest challenges the PFAC had in FY 2018:**

**27a. Challenge 1: Recruiting members of the medical staff and nursing staff to be on the PFAC**

**27b. Challenge 2: Recruiting members who are more reflective of the demographics of the hospital's patient population.**

**27c. Challenge 3:**

**27d. Challenge 4:**

**27e. Challenge 5:**

N/A – we did not encounter any challenges in FY 2018

**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): Fundraising activities-the PFAC donated a basket to be raffled off at the hospital's annual golf tournament. PFAC members have attended and volunteered at hospital educational programs. PFAC members have provided feedback regarding healthcare issues at the state, federal and local levels.

- 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?**

At almost every PFAC meeting, a member of the management team attends and presents information about their department or initiatives they are involved with. The PFAC is given the opportunity to ask questions, make recommendations and provide feedback based upon their own experiences at the hospital or in other health care institutions. Meeting minutes are shared.

**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 2018

**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:**

We do not have some of the services (high risk surgeries, maternity). We have not reviewed complaints; however, we have educated the PFAC members on the process.

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

The PFAC receives the hospital's monthly balanced scorecard which provides information as to how the hospital is performing on quality, safety, financial, patient experience and caregiver engagement.

**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): We review most of these issues through discussion and dialog in our meetings. It is more educational for the PFAC members versus "participating in activities."

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):

Ellen C. Carlucci, vice president

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): PFAC members received a summary of the year. Summary was taken from the monthly meeting minutes. Staff integrated this information into the report.

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: <https://www.umassmemorialhealthcare.org/marlborough-hospital/giving/patient-and-family-advisory-council>
- 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: [PFACMarlborough@umassmemorial.org](mailto:PFACMarlborough@umassmemorial.org) 508-486-5624
- No

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

- Yes, link: <https://www.umassmemorialhealthcare.org/marlborough-hospital/giving/patient-and-family-advisory-council>
- No, we don't have such a section on our website