



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 1st 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, <u>www.hcfama.org</u>. 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 or call us at 617-275-2982.

If you wish to use this Word document or any other form, please email it to <u>PFAC@hcfama.org</u>.

Reports should be completed by October 1, 2018.

2018 Patient and Family Advisory Council Annual Report Form

The survey questions concern PFAC activities in fiscal year 2018 only: (July 1, 2017 – June 30, 2018).

Section 1: General Information

1. Hospital Name: Whittier Rehabilitation Hospital Westborough

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**

U 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
- X 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: Teresa Knox Customer Service Coordinator
 - 2b. Email: tknox@whittierhealth.com
 - 2c. Phone: 508-871-2155
 - \Box Not applicable

4. Patient/Family PFAC Co-Chair Contact:

3a. Name and Title: Linda Thomasino - Co-Chair 3b. Email: linda.thomasino@gmail.com 3c. Phone: 978-833-4621

3c. Phone: 970-033-402

 \Box Not applicable

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

- Yes skip **to #7 (Section 1)** below
- \Box 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

- \Box Community events
- ☐ Facebook, Twitter, and other social media
- Hospital banners and posters
- Hospital publications
- Houses of worship/religious organizations
- \boxtimes Patient satisfaction surveys
- \Box Promotional efforts within institution to patients or families
- \Box Promotional efforts within institution to providers or staff
- □ Recruitment brochures
- Word of mouth/through existing members
- □ Other (Please describe):
- \Box N/A we did not recruit new members in FY 2018
- 8. Total number of staff members on the PFAC: Three
- 9. Total number of patient or family member advisors on the PFAC: SiX
- 10. The name of the hospital department supporting the PFAC is: Administration
- 11. The hospital position of the PFAC Staff Liaison/Coordinator is: Customer Service Coordinator

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

- Annual gifts of appreciation
- \boxtimes Assistive services for those with disabilities
- \boxtimes 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
- \Box Payment for attendance at other conferences or trainings
- \Box Provision/reimbursement for child care or elder care
- \Box Stipends
- \Box Translator or interpreter services
- Other (Please describe):
- \Box 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: Central Massachusetts Area

Don't know

14. Tell us about racial and ethnic groups in these areas (please provide percentages; <u>if you are unsure of the percentages</u> <u>check "don't know"</u>):

	RACE				ETHNICITY			
	% American Indian or Alaska Native	% Asian	% Black or African America n	% Native Hawaiian or other Pacific Islander	% White	% Other	% Hispanic, Latino, or Spanish origin	
14a. Our defined catchment area	0%	6.6%	1.0%	0%	83.7 %	2.5%	6.2%	Don't know
14b. Patients the hospital provided care to in FY 2018	.11%	1.1%	1.77%	0	95.45 %	0	1.55%	Don't know
14c. The PFAC patient and family advisors in FY 2018					100%			Don't know

15. Tell us about languages spoken in these areas (please provide percentages; <u>if you are unsure of the percentages select</u> <u>"don't know"</u>):

	Limited English Proficiency (LEP) %	
15a. Patients the hospital provided care to in FY 2018	1.55%	Don't know
15b. PFAC patient and family advisors in FY 2018	0%	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	.78
Portuguese	.44
Chinese	.11
Haitian Creole	0
Vietnamese	0
Russian	.02
French	0
Mon-Khmer/Cambodian	0
Italian	0
Arabic	0
Albanian	0
Cape Verdean	0

Don't know

15d. In FY 2018, 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

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:

Our PFAC committee recruits patients and family with no regards to race or ethnicity. Our committee represents our catchment which is predominately white. We will continue to recruit all individuals of all race or ethnicity.

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

- \boxtimes 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)
- \Box N/A the PFAC does not use agendas

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

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

 \boxtimes 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:

1. Update Whittier Health Network website with feedback from PFAC

2. Create graph of data for Patient Experience Surveys to display data and compare quarter to quarter in order to easily compare changes in data results and identify trends positive and negative

3. Committee will provide feedback regarding environmental change recommendations that they have identified while participating in services at the facility.

20. Please list any subcommittees that your PFAC has established: No subcommittees at this time.

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)

 \Box Other (Please describe):

 \square 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:

PFAC communicates with each other via email

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

Section 5: Orientation and Continuing Education

23. Number of new PFAC members this year: 0

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**)
- \square 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.)

 \boxtimes Hospital performance information

□ Patient engagement in research

□ Types of research conducted in the hospital

Other (Please describe below in **#25a**)

 \Box N/A – the PFAC did not receive training

25a. If other, describe:

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:

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

	Accomplishment	Idea came from (choose	PFAC role can be best
27a. (We		one)	described as (choose one)
27b.	26a. Accomplishment 1:Website updated by corporate with feedback from PFAC	 Patient/family advisors of the PFAC Department, 	 Being informed about topic Providing feedback or perspective
sch Me woi		committee, or unit that requested PFAC input	☐ Discussing and influencing decisions/agenda ☐ Leading/co leading
	committees because of the Experience Surveys to etings more frequently summarize data comparing quarter to	nel challenge With a Department, committee, or unit that	Here informed about topic Hending other k or perspective Discussing and influencing
27d.	Contacted in an easy to read format in order to identify trends for change	requested PFAC input	decisions/agenda
27e. (26c. Accomplishment 3: Feedback provided regarding environmental modifications needed at facility and changes implemented	 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
	26d. Accomplishment 4:	 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
	26e. Accomplishment 5:	 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

 \square 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
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- □ Bereavement
- \Box Board of Directors
- Care Transitions
- \Box Code of Conduct
- Community Benefits
- Critical Care
- Culturally Competent Care
- Discharge Delays
- \Box 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):
- X 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?

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
- \boxtimes 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 a ortic 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)

Z 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):

 \square 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:

Our volunteer members can only offer us a limited time for our PFAC meetings.

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

PFAC was given quality improvement reports and data to review and we discuss this at our quarterly meetings.

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 \Box 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): \square 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:

 \Box 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?

 \Box Researchers contact the PFAC

Researchers contact individual members, who report back to the PFAC

Other (Please describe below in **#38a**)

 \Box 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

 \Box 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):

Teresa Knox - Co-chair/Staff Lynn Keely - Staff Rebecca Roman - Administrator/Staff Linda Thomasino - Co-chair

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: www.whittierhealth.com

🗆 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:

🛛 No

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

 \boxtimes Yes, link: www.whittierhealth.com

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