

# 2024 Patient and Family Advisory Council Annual Report Form

The survey questions concern PFAC activities in fiscal year 2024 only: (July 1, 2023 – June 30, 2024).

## Section 1: General Information

NOTE: Massachusetts law requires every hospital to make a report about its PFAC activities publicly available by October 1 each year. Submitting the report to Betsy Lehman Center for inclusion on its website will fulfill that requirement.

1. Hospital Name: Fairview Hospital

2. PFAC Name:

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:

3a. Name and Title: Doreen Hutchinson VP Patient Care / CNO

3b. Email: dhutchinso@bhs1.org

3c. Phone: 413-854-9631

Not applicable

4. Patient/Family PFAC Co-Chair Contact:

4a. Name and Title:

4b. Email:

4c. 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):
- N/A – we did not recruit new members in FY 2024

**8. Total number of staff members on the PFAC: 4**

**9. Total number of patient or family member advisors on the PFAC: 6**

**10. The name of the hospital department supporting the PFAC is: Nursing administration**

**11. The hospital position of the PFAC Staff Liaison/Coordinator is: Doreen Hutchinson VP Patient Care / CNO**

**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 childcare 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:

Don’t know *South Berkshire County*

14. The racial and ethnic groups in these areas include (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	0.3	1.7	2.7	0	89.9	0.4	5.0	<input type="checkbox"/> Don’t know
14b. Patients the hospital provided care to in FY 2024	0	0	1.0	0	94.0	1.0	4.0	<input type="checkbox"/> Don’t know
14c. The PFAC patient and family advisors in FY 2024	0	0	9.0	0	72.0	9.0	9.0	<input type="checkbox"/> Don’t know

15. The languages spoken in these areas include (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 2024	2.87	<input type="checkbox"/> Don’t know
15b. PFAC patient and family advisors in FY 2024 (2 of 11 members)	18.0	<input type="checkbox"/> Don’t know

15c. What percentage of patients that the hospital provided care to in FY 2024 spoke the following as their primary language?

	%
Spanish	1.92
Portuguese	0.01
Chinese	0.02
Haitian Creole	0.002
Vietnamese	0.01
Russian	0.03
French	0.0
Mon-Khmer/Cambodian	0.008
Italian	0
Arabic	0.005
Albanian	0.0
Cape Verdean	0.0

Don't know

15d. In FY 2024, what percentage of PFAC patient and family advisors spoke the following as their primary language?

	%
Spanish	8.0
Portuguese	
Chinese	
Haitian Creole	8.0
Vietnamese	
Russian	
French	8.0
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:**

*The Director of Case Management gave recommendations; we then call and speak to the individuals an invite is extended for them to attend a meeting. We also ask diverse groups if they would like a representative on the committee ex. LGBTQ*

### 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:

*We ask PFAC members what areas they would like to hear from, what processes and departments they would like presented at the meeting. The committee also shares key initiatives ex. DEI efforts, Quality service results, changes in organizations, and other issues, ex. IV solution shortage.*

17b. If other process, please describe:

**18. The PFAC goals and objectives for 2024 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 2024 – Skip to #20

**19. The PFAC had the following goals and objectives for 2024:**

*Be informed of the 2023 Community Benefits results.*

*To recruit 1 new member.*

*Participate in DEI disability assessment*

*Participate in the development of DEI education plan for staff.*

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

*Community Benefits*

**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:**

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

**PFAC committee members had access to our Gala social media site, access to the hospital website, use emails for agendas, meeting notification. They use the web platforms for meetings- Teams meeting and zoom.**

**Section 5: Orientation and Continuing Education**

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

**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:

3 months of meeting minutes to review, come to introductory meetings to see if they would like to be a member and if they would be a good fit.

**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:

### **Section 6: FY 2024 PFAC Impact and Accomplishments**

*The following information concerns PFAC activities in the fiscal year 2024.*

**26. Please share the following information on the PFACs accomplishments and impacts:**

26a. What were the three greatest accomplishments/impacts of the PFAC related to providing feedback or perspective?

Accomplishment/Impact	Idea came from (choose one)
<b>Accomplishment/Impact 1:</b> <i>Recruited 1 new member</i>	<input checked="" type="checkbox"/> Patient/family advisors of the PFAC <input type="checkbox"/> Department, committee, or unit that requested PFAC input
<b>Accomplishment/Impact 2:</b> <i>Participated in DEI disability assessment</i>	<input type="checkbox"/> Patient/family advisors of the PFAC <input checked="" type="checkbox"/> Department, committee, or unit that requested PFAC input <b><i>DEI officer and CNO</i></b>
<b>Accomplishment/Impact 3:</b> <i>Disability education plan for the staff (this took place in 2024)</i>	<input checked="" type="checkbox"/> Patient/family advisors of the PFAC <input checked="" type="checkbox"/> Department, committee, or unit that requested PFAC input

26b. What were the three greatest accomplishments/impacts of the PFAC related to influencing the institution’s financial and programmatic decisions?

Accomplishment/Impact	Idea came from (choose one)
<b>Accomplishment/Impact 1:</b> <i>Updated process for ED patients to seek PCP</i>	<input checked="" type="checkbox"/> Patient/family advisors of the PFAC <input type="checkbox"/> Department, committee, or unit that requested PFAC input
<b>Accomplishment/Impact 2:</b> <i>Process for contacting patient advocate with concern</i>	<input checked="" type="checkbox"/> Patient/family advisors of the PFAC <input checked="" type="checkbox"/> Department, committee, or unit that requested PFAC input
<b>Accomplishment/Impact 3:</b> <i>Heard from a Haitian refugee who delivered her baby at our facility. The individual spoke about her experience at FV.</i>	<input checked="" type="checkbox"/> Patient/family advisors of the PFAC <input checked="" type="checkbox"/> Department, committee, or unit that requested PFAC input

26c. What were the three greatest accomplishments/impacts of the PFAC related leading/co-leading programs and initiatives?

Accomplishment/Impact	Idea came from (choose one)
<b>Accomplishment/Impact 1:</b> <i>Understand the questions being asked of patients around race, ethnicity, social determinates</i>	<input checked="" type="checkbox"/> Patient/family advisors of the PFAC <input type="checkbox"/> Department, committee, or unit that requested PFAC input
<b>Accomplishment/Impact 2:</b> <i>Gave great ideas on resources available for our disability education plan. Plan approved by the state.</i>	<input checked="" type="checkbox"/> Patient/family advisors of the PFAC <input checked="" type="checkbox"/> Department, committee, or unit that requested PFAC input
<b>Accomplishment/Impact 3:</b> <i>Supported the moving and creation of the new phlebotomy space that was built on the ground floor of the hospital</i>	<input checked="" type="checkbox"/> Patient/family advisors of the PFAC <input type="checkbox"/> Department, committee, or unit that requested PFAC input

27. The five greatest challenges the PFAC had in FY 2024:

**Challenge 1:** *Consistent PFAC members at meetings*

**Challenge 2:** *Getting new members interested in participating on the committee*

**Challenge 3:**

**Challenge 4:**

**Challenge 5:**

N/A – we did not encounter any challenges in FY 2024

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?**

*They participate in planning different activities and then hear the outcomes regularly. This is an agenda item.*

**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 2024

**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 (e.g., HCAHPS - Hospital Consumer Assessment of Healthcare Providers and Systems)
- Resource use (such as length of stay, readmissions)
- Other (Please describe): *action on DEI plan and changes to our processes*
- 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 are part of a health system and certain information is closely guarded.*

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

*They asked valid questions about our JC results and action plans, have given feedback on signage, availability of Narcan etc. Understand the initiatives and education done to decrease our Nulip C-Section rate.*

**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): *Education resources for disability competency*
- 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):**

Erin Hartwiger	Staff member
Pauline Dongala	Patient / family advisor
Jennifer Wade	Patient / family advisor

**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.**

*Berkshire Healthsystem web site*

- Yes, link:
- No

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

*Berkshire Healthsystem web site*

- Yes, phone number/e-mail address:
- No

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

*Berkshire Healthsystem web site*

- Yes, link:
- No, we don't have such a section on our website