Patient and Family Advisory Council (PFAC) Annual Report Form

Massachusetts law requires all acute and rehabilitation hospitals in the state to have a PFAC and report annually on its activities. To do this, you may fill out the form below for the past fiscal year (July 1 – June 30) and submit to the Betsy Lehman Center by October 1. Please email completed forms to PFAC@BetsyLehmanCenterMA.gov. While you are only required to submit information on your hospital-wide PFAC, you can choose to submit multiple forms if your hospital has additional PFACs. You can also include information about specialty PFACs in open-ended answers, or at the end of the report under "additional information."

The information provided on this form is public record. The report forms will be posted on the Betsy Lehman Center website and sent to hospital leadership, and the Center will aggregate the information into a statewide annual PFAC report. Learn more about the Center's PFAC work and see past reports at BetsyLehmanCenterMA.gov/PFAC.

GENERAL INFORMATION

1. Hospital name: Whittier Rehabilitation Hospital - Westborough

2. How many PFACs does your hospital have in total? 1

3. The information on this form reflects the work of a PFAC that serves as:
   - (●) The sole PFAC at our hospital, ACO, or organization
   - ( ) A hospital-wide PFAC, but there are additional department, unit, population-specific, or specialty PFACs as well
   - ( ) A hospital department, unit, or specialty PFAC
   - ( ) A hospital-based PFAC that also serves an ACO
   - ( ) A system-wide PFAC

4. Patient/family co-chair

   Name: Mary Ellen Dolan

   Email: maryellendolan@aol.com

5. Hospital co-chair

   Name: Teresa Knox

   Job title: Customer Service Coordinator

   Email: tknox@whittierhealth.com

   Phone number: 508-871-2155

6. In which department/service line is the PFAC function in your hospital located?
   - (●) Patient Experience, Patient Services, or Patient and Family Relations
   - ( ) Volunteer Services
   - ( ) Community Relations
   - ( ) Social Work
   - ( ) Quality and Safety
   - ( ) Nursing
   - ( ) Other:

7. How much of the hospital co-chair's (or designated PFAC staff member's) role within your organization is dedicated to PFAC work? A quarter or less of their role

8. How often does your PFAC meet? Quarterly

   Other:

9. How do you typically convene your PFAC? A mix of both in-person and virtually

   If a mix, please describe: Most in person, a couple via zoom.

PFAC MEMBERSHIP

10. PFAC membership [as of June 30]
    a. Total number of members: 6 to 10
    b. Total number of patient/family advisers: 6 to 10
    c. Total number of staff advisers: 1 to 5

11. Has your PFAC changed in size within the last year? No, our PFAC has stayed the same size

    Please describe changes in your PFAC size, including reasons for these changes:

12. If members of the PFAC are subject to term limits, please select the length of terms: n/a

13. Are there limitations around how many terms a member can serve? Please describe any in the field below.

    None

14. Which recruiting efforts does your hospital use to identify and attract new PFAC members from the community? (select all that apply)

    - ☑ After visit summary or survey messages
    - ☑ Clinicians' recommendations
    - ☐ Discussions with people in the clinic
    - ☑ Hospital website
    - ☐ Grievances
    - ☑ Pamphlets
    - ☑ Patient/family feedback
    - ☑ Social media
    - ☐ Tables at hospital entrances
    - ☐ Visits to the units
    - ☑ Word of mouth

    Other:

COMMUNITY REPRESENTATION

State regulations call for hospital PFAC membership to be reflective of the community it serves. Two sets of data can help better understand the hospital's community.

- Race/Ethnicity: Find data about the race and ethnicity of the community served by your hospital by looking at your catchment area data and hospital discharge data.
- Languages spoken: Please record the most current data your hospital has for languages spoken by your patient population, which is best sourced within your hospital. This information may have already been submitted to the Center for Health Information and Analysis (CHIA).

	Percentage of patient population
Spanish	.009
Portuguese	.002
Chinese	.003
Haitian Creole	.0009
Vietnamese	.0009
Russian	.002
French	
Mon-Khmer/Cambodian	
Italian	
Arabic	.005
Albanian	
Cape Verdean	
Limited English proficiency (LEP)	

Consider the data above when answering questions 15-17.

15. What demographic representation is missing from your PFAC, and where is there room for improvement?

All are welcome at our hospital, so none are missing. We admit based on referrals that we receive.

16. There are many ways to describe the array of perspectives in a community, including age, income, gender, sexual orientation, gender identity, disability, veteran status, career, chronic or rare disease status, religion, etc. How would you describe your PFAC membership's representation of the community it serves more broadly?

Most of our members live locally and are past patients or family members of former patients.

17. Describe any strategies and activities during the last year to align PFAC membership with the diversity of the community served by your organization.

All former patients and family members are considered for membership. We do not discriminate membership based on age, gender, race, ethnicity, etc. All are welcome.

IMPACT AND ENGAGEMENT

18. How often do PFAC members engage in these ways with initiatives presented to them?
    a. Approval: *The department asks for approval from the PFAC on an already completed initiative* Always
    b. Feedback: *The department asks the PFAC for input on a project in progress* Always
    c. Codesign: *The PFAC is involved at the inception of the project* Often
    d. Other, please specify:

19. How often do you keep track of these types of metrics?
    a. Process metrics: *How it's done (e.g., number of meetings, number of initiatives, etc.)* Sometimes
    b. Outcome metrics: *The result (e.g., improvement in scores, reduction in falls, etc.)* Sometimes
    c. Impact metrics: *The value (e.g., change in outcomes due to PFAC involvement)* Always

20. Describe key work accomplished by the PFAC last year. For example, in what ways did the PFAC provide feedback/perspective, lead or co-lead programs and initiatives, or influence the institution's financial and programmatic decisions? Include at least three accomplishments.

1. PFAC members elected new Co-chair person - Mary Ellen Dolan

2. PFAC members discussed ideas of starting a support group for caregivers.

3. PFAC discussed starting to collect resources for caregivers to have available at the hospital and possible links on our website.

21. How do you promote the accomplishments of your PFAC? (Select all that apply)

- ☐ Newsletter
- ☐ Presentation
- ☑ Report
- ☐ Word of mouth
- ☐ We currently do not promote

Other: Website

22. Indicate the committees within your organization on which a PFAC member serves. (Select all that apply)

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

Other: Social Media

23. Are there any PFAC-led workgroups or projects you would like to highlight?

24. What were the greatest challenges your PFAC faced?

Continued recruitment of new members and having enough members present at our quarterly meetings to have a quorum.

PATIENT SAFETY

Patient safety is the prevention of harm to patients while receiving health care. It's a fundamental principle of health care, and it's considered the foundation of high-quality care. Patient and family input and insight about safety considerations and risks is an essential component of safety improvement work.

25. For each of the following items, indicate your PFAC's level of involvement.
    a. Patient/family advisers were represented at board meetings: Never
    b. Patient/family advisers were consulted on safety goal-setting and metrics: Regularly
    c. Patient/family advisers participated in safety improvement initiatives: Regularly

26. Summarize your PFAC's contributions to patient safety work at your organization.

Risk management data is reviewed and suggestions for improvement is always welcomed.

GOAL SETTING

27. Did the hospital/organization leadership share its goals for the year with the PFAC membership? Yes

28. Did the work accomplished by your PFAC help advance the organization's goals? Somewhat

29. Does your PFAC have goals for the current year? Yes

    If yes, what are your PFAC's goals for the year?

Committee members discussed ideas for setting up a support group to help family members through the overwhelming process of being a caregiver. This will be an ongoing goal for the upcoming year.

30. Do these goals support the organization's goals and priorities for the year? Yes, the goals directly relate

    If yes, in what ways do these goals support the organization's goals and priorities?

Offering support for caregivers will assist them in caring for the loved one, as well as benefit for satisfaction and experience at our facility.

ADDITIONAL INFORMATION

31. Have you made any changes to your PFAC over the last year? Please describe.

32. Is there anything else your hospital would like to highlight that has not been captured above?

33. This report was prepared and reviewed by:
    a. Name: Teresa Knox
    b. Title: Customer Service Coordinator
    c. List additional people's names and titles as needed below:

    Lynn Keeley, Director of Performance Improvement
    Mary Ellen Dolan, Co-chair

34. This report is for the state's fiscal year ending June 30, 2026