HEALTH CARE FOR ALL

PFAC
MASSACHUSETTS
PATIENT & FAMILY ADVISORY COUNCILS
Making a Difference in Care

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, 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 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.

Reports should be completed by October 1, 2020.

2020 Patient and Family Advisory Council Annual Report Form

The survey questions concern PFAC activities in fiscal year 2020 only: (July 1, 2019 – June 30, 2020).

Section 1: General Information

1. Hospital Name: UMass Memorial Medical Center

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.

1a. 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):

1b. Will another PFAC at your hospital also submit a report?

- ☐ Yes
- ☐ No
- ☒ Don't know

1c. 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: Alicia Wierenga
2b. Email: Alicia.Wierenga@umassmemorial.org
2c. Phone: 508-774-1904
☐ Not applicable

4. Patient/Family PFAC Co-Chair Contact:

3a. Name and Title: Kathleen Buchanan
3b. Email: bmom1109@gmail.com
3c. Phone: 508-736-8555
☐ 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: Billie Adler, Patient Experience Project Coordinator
6b. Email: billie.adler@umassmemorial.org
6c. Phone: 508-414-6001
☐ 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 2020

8. Total number of staff members on the PFAC: 9

9. Total number of patient or family member advisors on the PFAC: 25

10. The name of the hospital department supporting the PFAC is: Patient Experience

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

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): Annual dinner/celebration gathering
- ☐ 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: Worcester 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		7	9		82	2	9	☐ Don't know
14b. Patients the hospital provided care to in FY 2020	.2	3.4	5.7	.1	73.6	11.3	5.7	☐ Don't know
14c. The PFAC patient and family advisors in FY 2020			12.5		87.5			☐ 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 2020	25389	☐ Don't know
15b. PFAC patient and family advisors in FY 2020		☐ Don't know

15c. What percentage of patients that the hospital provided care to in FY 2020 spoke the following as their primary language?

	%
Spanish	4.9
Portuguese	1.35
Chinese	
Haitian Creole	
Vietnamese	.46
Russian	
French	
Mon-Khmer/Cambodian	
Italian	
Arabic	.57
Albanian	.33
Cape Verdean	

☐ Don't know

15d. In FY 2020, 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:

Developed a diversity task force committee this year to advance efforts to recruit members who are representative of the Greater Worcester community and our medical center's patient population. Developing culturally sensitive recruitment materials and reaching out to leaders of ethnically diverse community organizations.

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:

17b. If other process, please describe:
Volunteer co-chair, staff co-chair and PFAC staff liaison develop agenda and distribute to members prior to the meeting. Over the course of the year, PFAC members suggest ideas for meeting topics/presentations/speakers.

18. The PFAC goals and objectives for 2020 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 2020– **Skip to #20**

19. The PFAC had the following goals and objectives for 2020:

- Establish a more diverse membership by recruiting and bringing onboard at least one member from the following communities:
  1) Black/African American community
  2) Southeast Asian community
  3) Latino community
- Assist and implement a volunteer rounding program
- Develop an 'empathy' project
- Create a virtual idea board/project management board
- Celebrate/sponsor PX week in April

20. Please list any subcommittees that your PFAC has established:
Diversity and Inclusion Task Force committee

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): PFAC doesn't interact directly with the hospital Board of Directors, but reports indirectly to the Board through the following channels:
  Annual reports and meeting minutes are submitted to the Clinical Performance Council (CPC), which in turn reports to the Patient Care Assessment Committee (PCAC) of the board.
- ☐ 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 communicate with members via email and have a PFAC Facebook page. Our members also attend our health system's virtual town hall meetings that were established during the pandemic and are currently on-going.

- ☐ 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: Attended Standards of Respect workshop that all UMass Memorial Employees are required to participate in.

Section 6: FY 2020 PFAC Impact and Accomplishments

The following information only concerns PFAC activities in the fiscal year 2020.

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)
Accomplishment/Impact 1: Successfully moved our monthly meetings to a virtual platform during Covid	☒ Patient/family advisors of the PFAC ☐ Department, committee, or unit that requested PFAC input
Accomplishment/Impact 2: Had an inspirational speaker at our annual dinner – an MD who furthered our understanding of patient- and family-centered care	☐ Patient/family advisors of the PFAC ☒ Department, committee, or unit that requested PFAC input
Accomplishment/Impact 3: Provided input on initiative to improve crucial conversations between providers and patients with critical illnesses; supporting patients/families in maintaining control over their health and providing tools to dialogue with caregivers about their care and end of life.	☐ Patient/family advisors of the PFAC ☒ 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)
Accomplishment/Impact 1: Provided patient feedback that was influential in making changes to the development of MyChart platform	☐ Patient/family advisors of the PFAC ☒ Department, committee, or unit that requested PFAC input
Accomplishment/Impact 2: Actively engaging a member on our Patient Experience Leadership Council (PXLC)	☐ Patient/family advisors of the PFAC ☒ Department, committee, or unit that requested PFAC input
Accomplishment/Impact 3: Reviewed materials/brochure for financial counseling to ensure literature was patient-focused/friendly	☐ Patient/family advisors of the PFAC ☒ 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)
Accomplishment/Impact 1: **Supported caregivers remotely during PX week by organizing giveaways to show our** appreciation for their efforts	☒ Patient/family advisors of the PFAC ☐ Department, committee, or unit that requested PFAC input
Accomplishment/Impact 2: Provided advisement to National Patient Safety Week committee	☐ Patient/family advisors of the PFAC ☒ Department, committee, or unit that requested PFAC input
Accomplishment/Impact 3: Steering committee launched to develop a strategic plan to reinvigorate our council (coordinated by PFAC staff liaison with the support of Patient Experience Dept.)	☐ Patient/family advisors of the PFAC ☒ Department, committee, or unit that requested PFAC input

27. The five greatest challenges the PFAC had in FY 2020:

Challenge 1:	**Recruiting new members**
Challenge 2:	**Developing a more diverse membership**
Challenge 3:	**The impact of Covid on operations: Disruption to meeting schedule and attendance; loss of involvement with projects that were halted as a result of the pandemic**
Challenge 4:	Finding ways to remain actively engaged at the medical center during Covid
Challenge 5:	**Lack of awareness about PFAC across the** medical center/system

☐ N/A – we did not encounter any challenges in FY 2020

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 *Patient Experience Leadership Council*
☐ Pharmacy Discharge Script Program
☒ Quality and Safety
☒ Quality/Performance Improvement
☐ Surgical Home
☒ Other (Please describe): Cancer committee, Food and nutrition/Housekeeping committee, Patient Care Assessment Committee (PCAC)
☐ 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? Committee members report out at our monthly meetings

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 2020

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):
☐ 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:

The hospital shared the information above with PFAC through meeting presentations, email, etc. Subject matter experts were asked to attend meetings to report on medical center progress in relation to these areas.

The CEO of our health system and the Sr. Director of Patient- and Family-Centered Care met with our PFAC to report out and inform us about operations/measures/outcomes/quality/safety specifically as they related to the medical center's response to Covid-19.

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

A member of the Ambulatory Services senior leadership team met with our PFAC at one of our monthly virtual meetings to talk about ideas/initiatives to encourage patients not to put off care due to fears around coming to the hospital during Covid. We also provided feedback and input to team leaders working on Telehealth and Virtual Health initiatives that were under development and being rolled out during the pandemic.

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): Not delaying care during Covid
☐ 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 <u>strongly</u> 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):

Alicia Wierenga, Sr. Director, Patient- and Family-Centered Care/PFAC Staff Co-Chair
Kathleen Buchanan, Volunteer 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: https://www.umassmemorialhealthcare.org/umass-memorial-medical-center/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: PFAC@umassmemorial.org

☐ No

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

☒ Yes, link: https://www.umassmemorialhealthcare.org/umass-memorial-medical-center/giving/patient-and-family-advisory-council

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